

## APPLICATION DATA SHEET

### Application Information

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?: None

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?:

Computer Readable Form (CRF)? No

Number of Copies of CRF::

Title:: CONDITION DETECTING SENSOR  
(As Amended)

Attorney Docket Number:: 1034290-000005

Request for Early Publication? No

Request for Non-Publication? No

Suggested Drawing Figure::

Total Drawing Sheets:: 7

Small Entity? No

Latin Name::

Variety Denomination Name::

Petition Included? No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

### **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Japan

Status:: Full Capacity

Given Name:: Hiroshi

Middle Name::

Family Name:: TOUGE

Name Suffix::

City of Residence:: Ichinomiya-shi

State or Province of Residence:: Aichi-ken

Country of Residence:: Japan

Street of Mailing Address:: c/o AISIN SEIKI KABUSHIKI KAISHA, 1, Asahi-machi 2-chome

City of Mailing Address:: Kariya-shi

State or Province of Mailing Address:: Aichi

Country of Mailing Address:: Japan

Postal or Zip Code of Mailing Address:: 448-8650

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Japan

Status:: Full Capacity

Given Name:: Takehiko  
Middle Name::  
Family Name:: SUGIURA  
Name Suffix::  
City of Residence:: Kariya-shi  
State or Province of Residence:: Aichi-ken  
Country of Residence:: Japan  
Street of Mailing Address:: c/o AISIN SEIKI KABUSHIKI KAISHA, 1, Asahi-  
machi 2-chome  
City of Mailing Address:: Kariya-shi  
State or Province of Mailing  
Address:: Aichi  
Country of Mailing Address:: Japan  
Postal or Zip Code of Mailing  
Address:: 448-8650

### **Correspondence Information**

Correspondence Customer Number:: 21839  
Phone Number:: (703) 836-6620  
Fax Number: (703) 836-2021

### **Representative Information**

Representative Customer Number:: 21839

### **Domestic Priority Information**

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent Application::</b>	<b>Parent Filing Date::</b>
This Application	National Stage of	PCT/JP2005/005895	03/29/05

## Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
Japan	2004-100340	03/30/04	Yes

## Assignee Information

Assignee Name::	AISIN SEIKI KABUSHIKI KAISHA
Street of Mailing Address::	1, Asahi-machi 2-chome
City of Mailing Address::	Kariya-shi
State or Province of Mailing Address::	Aichi
Country of Mailing Address::	Japan
Postal or Zip Code of Mailing Address::	448-8650